THE

SANITARY COMMISSION BULLETIN.

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PLAIN ANSWERS TO PLAIN QUESTIONS.

Four questions about the U. S. Sanitary Commission, which are asked by some people who are not so much carried away by the excitement of the Fairs but what they can stop and inquire whether, after all, there is any sober necessity or fitness in this exertion to sustain an institution which aims to *supplement* Government supplies for the aid or relief of the soldiers.

First.—What *is* the Sanitary Commission, and why does such an institution exist at all?

Second.—Is the growth of this Sanitary Commission a healthy growth, or is it not rather ministered to by a morbid sentiment?

Third.—Has not the "*emergency*" passed, which is said to have called for, and justified this irregular agency?

Fourth.—If the emergency has not passed, three years having elapsed, what prospect is there that it ever will be passed so long as the war continues?

These are the questions which some people ask — the birth, the pulse, the muscle, and the will of this Sanitary Commission, with its probable length of life.

The answers are as follows:

First.—The Sanitary Commission came into existence as the child of these two parents, viz.: on the one side, the motherly love which kept swelling up night and day in millions of hearts, and flowed out towards the tented field in such a stream as threatened to overrun all bounds. On the other side, the manly demand for law and system to guide and control this great moving tide. The marriage of these two gave birth to the Commission. Except for that union—the masculine with this feminine element—that tremendous tide of love, and impulse, and anxious tenderness, would ere long have been met by pointed bayonets and turned back, and forbidden entrance to the camp and hospital. This would have been done as a "military necessity," to save the Army from the embarrassment and the enervating influence of this rush of indiscriminate, irresponsible charity.

But God, in his mercy, could not see this mighty heaving of human hearts, which might become such a real power for good, lost to the World; so He wedded it to that which is really its truest lover and rightful spouse—law and system.

Government received assurance that not obtrusively, or unwisely, should this work of charity henceforth be done; that it would ever recognize and consult military authority and the necessity for military rules and discipline; that it would not run counter to, or parallel with (as in rivalry of,) the Medical Department, but strictly and gladly in co-operation with it—and to supply what that Department did not, or could not, readily furnish, whereby to add to the good health and good cheer of their sons, fathers and husbands, who meantime did not love their homes less, though they loved their country more.

Thus, the Sanitary Commission is the blended charity of all the Loyal States,

gathered and organized according to carefully studied methods approved by Government, so as best to guarantee the efficiency —to economize the energy, and to secure the continuance of this generous love which looked out with aching eyes and waiting hands from almost every house in the land.

Thus, is the Sanitary Commission the Agent of the People,—and a "Trustee" of their bounty, *held accountable*, and wishing to be held accountable for the use of all that is committed to it, of love and of opportunity, as well as of money and of supplies. It is the office of the Commission to find and meet those many needs which, as the world knows, always have existed with every great army, in spite of all that Government could do.

Its office embraces not merely the temporary alleviation of suffering, but by careful investigation and wise council, it aims to introduce reforms and new methods, and to remove many of the causes themselves of disease and death—and it seeks to excite to keener watchfulness and larger provision of official faithfulness.

Thus, in another form of phrase, is the Sanitary Commission the hand of "the People," filled with bread and wine, reached out in such manner as not to be refused; while back of it, giving it the pulse of its daily life, is this great, warm, throbbing heart at home—which must throb and beat, and will not be still, until those they have sent to the field be given back to them living or dead; and this they do not ask and would not accept until the war is so finished that Freedom shall be borne in with Peace.

Such is the answer to the first question: What *is* the Sanitary Commission, and why does such an institution exist at all?

The second question asks: Is this constantly increasing growth of the Sanitary Commission a healthy growth, or is not rather ministered to by a morbid sentiment? The answer is: It is peculiarly free from the danger or tendency of running into or resting upon sentiment. Its whole system of action is reduced, as far as is consistent with humanity, to business rules. It appeals to the public for support, not merely on the ground of alleviating the suffering of the soldiers, but on the ground of rendering more effective the men who are to carry on the war. It looks upon each man saved, or restored to health, as so much muscle, or will, or power given to the Army, as well as a husband or son given to his home.

The next question asks: Has not the "emergency" past which is said to have called for and justified this irregular agency? The answer is very clearly: No, it has not past. The calls for the agency are, indeed, different from what they were at first in many respects. Government, with increased facilities and larger experience, now embraces in its regular arrangements provision for some of the services once rendered by the Commission. But Government makes no provision for that immense class of cases covered by "Special Relief," requiring "Houses," "Lodges," agencies for correcting defective papers, collecting back pay for the feeble, obtaining pensions, carrying to their own homes the sick, guarding discharged soldiers from knaves and fiends, distributing clothes and comforts to individuals who are destitute. Hence, in this respect, the "emergency" has not passed which called for this irregular agency. Nor has Government yet obtained from Congress a bill granting to the Medical Department independent transportation for its supplies; and, in lack of this, it is absolutely essential that there be some agency—efficient, experienced, and well provided—to stand ready to bear to the battle-field, without a moment's waiting and without dependence upon Department supplies for the wounded and exhausted; for just then it is, in the first few hours after a battle, that a very little succor saves hundreds of lives; an hour of time then, and one ton of supplies then, are worth many hours and many tons the day following. Nor has Government yet provided that its Surgeons have authority to purchase, at discretion, supplies to meet emergencies; hence, the necessity continues for an agent close at hand authorized to buy, to any amount, from the nearest source, a supply—whatever may at once be used to feed or shelter the wounded upon the field of battle. And facts show that, but for this agency having been near, with the power

thus to purchase supplies, great suffering and loss of life would have occurred where food and blessing were by this means given to hundreds and even thousands of our wounded men.

Therefore, so long as these two obstacles continue to exist, (which the Medical Department have endeavored to have removed,) the "emergency" spoken of still stands; and so important to the saving of the lives of men and alleviating their sufferings is it to meet this emergency, that it would be guilt to neglect making the largest provision, though it be made, as it now is, at a heavy cost.

We might speak, also, of the work of furnishing to the general and regimental hospitals home comforts, as well as more usual supplies to meet special deficiencies. While these "supplementary" supplies give a hand of help in time of real need, these extra home comforts restore to health the soldier in his weary hospital life. We must not omit mention of the "Hospital Directory." It is essential, so the public say, to the friends at home; and, therefore, just here an "emergency," or certainly a demand, exists which the Sanitary Commission alone attempts to meet.

The final question asks: If the "*emergency*" has not passed, three years having elapsed, what prospect is there that it will be passed so long as the war continues? The answer is: We see no prospect that the need of the Commission will cease while the war goes on. Most of the conditions enumerated in answering the previous questions will, doubtless, continue to the end. Some of them are conditions inseparable from war, which Government cannot attend to, which its heavy machinery (necessarily and wisely made heavy, adapted to meet permanent conditions, not emergencies,) cannot adapt itself to.

Some, as is readily seen, are conditions developed as the war goes on. Those which exist this year may not exist next year; but others will arise in their place, unexpected now, but claiming at the time prompt and ample provision.

And it becomes a question worth considering, whether, even if it were possible, it would be desirable to have the provisions of Government so perfect and efficient that there would be no necessity or opportunity for this voluntary aid of the people? Who can tell how much of the cheerful and vigorous life of our Army, now years away from home, may be owing to the constant recognition by the soldiers of the work and love of the people ever thinking of them.

And who shall say what would have become of the people—the mothers, wives and daughters of the men in the tents, the hospitals and on the battle-fields—if they had not been allowed to spend their thoughts and time in working for those they love better than life!

F. N. K.

SURVEY OF THE FIELD.

No. 823 Broadway, N. Y.,
February 27th, 1864.

To the Standing Committee of the United States Sanitary Commission:

Gentlemen—A survey of the field of the Commission's work, as furnished by communications received at this office since your meeting of the 19th instant, shows a varied degree of activity existing in its different Departments.

At the West, increased attention is being given to the hospital centers at Memphis and Vicksburg, having under treatment 2,500 and 2,000 sick, respectively. Vicksburg has again become an important point, the sick and wounded of Gen. Sherman's forces continuing to arrive there up to the 17th instant, the date of the last advices.

The steamer Navigator, chartered by Dr. Newberry, for transportation on the Mississippi River, became disabled, and her first load was transferred to the Government transport Mississippi, by which it would be conveyed from Cairo free of cost to the Commission, to various points on the river.

Dr. Warriner expected to send a portion of the vegetables to New Orleans, where such supplies were much needed.

The Samuel Hill, sent up from New Orleans to Cairo, with sick, was also provided at that point with a considerable stock of vegetables, to be distributed within the Department of the Gulf.

At Chattanooga, the health of the troops is reported as improved. Special attention had been paid to scorbutic patients, and the issue of vegetables had effected much

good. Dr. Barnum has sent the report concerning transportation of the sick asked for by the Commission in January. The Assistant Surgeon-General has adopted Dr. B. as an officer of the Medical Bureau, but proposes that he shall still report to Dr. Newberry.

Dr. Newberry is at Cleveland, but returns early next week to Louisville, and thence to Nashville. He has been informed of the appropriation by the Commission for the building of Homes at Detroit and Buffalo.

Among the forces in Virginia, there has been reported little but routine work, At Portsmouth, however, a Lodge as a center of the work of special relief has been established by favor of the military authority, and is likely to render a much needed service. General Butler also evinces a disposition to encourage the Commission in its proposed care for the sick on the flag-of-truce boats, should exchanges of prisoners again occur.

In North Carolina, Dr. Page, is with system, planting hospital gardens with apparent prospects of success. He is much concerned at the possible spread of small pox, owing to the imperfect character of the vaccine matter received in that Department. He will be furnished weekly with moderate amounts of carefully selected virus. From September, 1863, to January 1st, in 666 cases—the mortality was 184, or about 28 per cent. From January to February 13th, of 285 new cases 105 died—a mortality of about 37 per cent., indicating, perhaps, an increased intensity of the epidemic influence.

Dr. Marsh writes from Beaufort of much work done and attempted with insufficient help and inadequate strength. He proposes to return to New York after the present campaign is over, and he has supplied in advance, so far as they can be anticipated, the wants of the following two months. If in sufficient health he will return, and would like to be accompanied with one medical and one lay assistant.

Our losses of stores at the late repulse at Olustee, Fla., are believed to be slight. The provision of stores for this Department is shown to be good, by the fact that a humane and careful Inspector like Dr. Marsh urges us not to send out any supplies to him on account of this engagement. Dr. Marsh reports a statement of casualties in Florida. He was to return there on the 23d instant.

There are no reports from Louisiana within the week, except a special one concerning aid rendered to the Navy during the past year, and the monthly report of stock on hand, and requisition for supplies.

In the home field there is great need, especially at the East, of increased effort for the production of material supplies. The three principal depots at Boston, New York and Philadelphia, are now nearly empty, and the prospect of their speedy replenishment, except the one at Boston, is not good. The diverting influence of the present and projected Fairs accounts for this, to some extent, in New York and Pennsylvania.

The number of canvassers employed in the Eastern States is now considerable. In New England, three; in New York, two; in New Jersey, one; and visiting several States, two; while in the home field at the West three are employed. They have been generally instructed that they are not to consider as of secondary importance the increase of local work, and not to solicit contributions to the Central Treasury, where such contributions would diminish the local interest in the work of supply in kind.

No reports of Inspectors have come in within the week. Dr. Graham has gone to Knoxville.

Respectfully,

J. Foster Jenkins,
General Secretary.

THE SANITARY COMMISSION AND THE MEDICAL DEPARTMENT.

[From the North American Review.]

It is not the fault of the Sanitary Commission if exaggerated ideas of its claims and importance, as compared with those of the Medical Department, prevail in many quarters. In public addresses in all the great cities, in published letters to Governors of States and to State Surgeon-Generals, in its regular reports, and under all circumstances, it has magnified and cele-

brated the growing efficiency of the Medical Department, chronicled its vast and beneficent reforms, defending the Bureau against unjust charges, shown the recklessness of the rife rumors as to the general negligence, cupidity, and impotence of the Surgeons in the service, and endeavored to acquaint the public with the dependence of the sick and wounded on the care, pity, and generous provision of the Government itself, rather than on outside aid and mercy.

It is plain how exposed to misapprehension the Medical Department of so vast an army as ours is, how little credit it gets for the regular and successful performance of its duties, how much blame for its occasional failures to meet the exigencies that beset its affairs. All the while, for food, clothing, shelter, medical care, nursing, transportation, the sick or wounded soldier is dependent upon, and actually receives, seven-eighths of all he needs from the Government itself. The other eighth he must owe to the pity and care of some outside beneficence. He himself is apt to accept only as his due, and therefore thoughtlessly and ungratefully, all that the Government does for him, and to have the liveliest sense only of what it does not do, and to utter the most indignant complaints at its neglect. Of course he gives a corresponding gratitude to those who come in as volunteers to supply the necessary or unavoidable defects and omissions from which he suffers; and the Sanitary Commission, or some similar organization, gets for its comparatively light labors the praise and the gratitude really due in much larger measure to the Government itself and the Medical Department—above all, to the laborious and devoted Surgeons themselves. It is the old fallacy—we think more of the two-penny ounce of butter than of the ten-penny loaf of bread; because one merely satisfies our hunger, and the other gratifies our palate. The Sanitary Commission, being really in earnest, laboring not for praise, but for practical results, saw the vast importance of strengthening and stimulating that system to which the soldier must owe seven-eighths of his chances of escape from sickness, and of care and comfort when sick; and that no skill or success in managing and magnifying its own contingent work, which at the utmost was but a fractional interest, could be any sort of substitute for the zeal and efficiency of the regular Department. It saw and recognized the value of the loaf of bread, and determined not to allow the butter question to blind its own or the public's eyes.

But, after all, it had its own work to do, and to do well. It was plain enough, after a very short study, that the general utility and success of the Army system, and of the Medical Department as a portion of it, depended upon rigidity of method. Discipline is the soul of an army; strict accountableness and limited responsibility are essential in the administration of military affairs. Routine makes the skeleton, and red tape applies the ligaments to the system.

To attempt to supply an army as a family, or a village, or a city is supplied, or to carry civil maxims or customs into the camp, is a pure impossibility. Strict rules and regulations, and compulsory and inevitable conformity to them, are the conditions of the largest good to the largest number. It is certain, beforehand, that this necessary system will press with terrible severity upon a considerable class of exceptions; but to consider these exceptions, and bend the system to accommodate or include them, would be to imperil the advantage of that vast majority which the rule is established to serve. If the tape is so loose that any one paper can be easily pulled from the bundle, all the papers are likely to be lost, or found scattered by the wind. The Sanitary Commission, therefore, has never joined in the popular cry of too much red tape; it has never asked for, or consented to, any scheme for conducting medical affairs in a free and easy manner, without military subordination and carefully limited responsibilities. Whatever evils have attended this system, have been less than those its removal would instantly evoke. Indeed, it was mainly to enable the Medical Department to maintain its own rules with rigorous fidelity. that the Commission undertook to look after only these individual wants, and those exceptional sufferings, which grow out of the necessary imperfection of all large systems, and which have always furnished it its only legitimate and

welcome opportunities of service. That the exceptions in an army of a million and more of men, at one time or another in the field, with an average sick list of at least fifty thousand men, should be numerous in themselves, however small relatively to the number taken care of by the Medical Department itself, is what the most thoughtless might anticipate. They have been numerous enough and constant enough to task the utmost liberality of the nation, and to afford the most steady and exhausting labor to the Sanitary Commission. At no time have the extra supplies furnished by the public to the Commission, or to any and all outside ministries, been fully equal to the demands. Nor, with the experience now afforded to the careful students of army movements and exigencies, does it appear at all strange that great and frequent failures should attend the best plans of the Medical Department; battles proving general, when they were expected to be skirmishes or reconnoissances; the wounded turning out twice as many as any reasonable foresight could have anticipated; time and place of fighting being both suddenly changed; transportation impeded or preoccupied by greater necessities; and movements of the enemy, instantly defeating the whole, and the most sagacious arrangements made by Medical Directors.

Let it be remembered, that the first office of an army is to fight, and that the first necessity of the Government is to look after the fighting men, providing them with adequate ammunition, food, and reinforcements—that at the time of an impending battle, or during one, the chief solicitude is not, cannot, and ought not to be about the wounded, but about those still able to fight—and it will be seen how perplexed, delayed, and hampered the Medical Department must be, in getting forward its stores, in removing the wounded, or in taking care of them promptly. The first interests of the Army require that the Medical Department should be left in this subordinate and dependent position. You cannot afford it independent transportation without destroying its co-ordination with the other departments, and embarrassing it nine-tenths of the time with the care of trains, horses, and forage, for the sake of the advantages that would accrue to it for the other tenth of the time. Nor can the Commanding-General safely allow his hospital stores to be jeoparded by advancing them to the front, which doubtless would, if safe, be the most convenient for the service of the wounded or the sick. Thus, after the battle of Gettysburg, when Meade was pursuing Lee's flying army, and another general battle was hourly expected near the old field of Antietam, the General would not, and could not, allow the vast medical stores required in case of a battle to be brought over South Mountain, because Boonsboro', beyond which his own headquarters lay, and where the Sanitary Commission had opened its store houses, was liable any day to be attacked and ransacked by the enemy's cavalry. This was prudent and humane; and yet in case of a great battle it must have caused enormous suffering. Now, for this very reason that it was not safe for the Government stores, the Sanitary Commission determined to run the risk of its own stores, that, if a battle did occur, it might alleviate the wants of the battle-field, till the regular medical stores could be brought up. Thus the Medical Department followed its legitimate and bounden course of duty in obedience to judicious orders from headquarters. The Sanitary Commission, with its independent transportation, and independent movements in general, followed also its legitimate and necessary duty, and stood ready to prevent the evils which must otherwise flow from the best and wisest course left open to the Medical Department.

But it was not in battle fields and exigencies chiefly that the Commission found most seriously tested its principle of doing nothing for the sick and wounded soldiers which it could induce or compel the Government to do. Regimental, field, and general hospitals have been the steady sphere of its labors. It has spent its chief time, supplies, and energies in satisfying the wants existing there. For the first year of the war, there was not commercial industry enough in the country to supply the actual wants of the Army. Clothing could not be manufactured fast enough to meet the rapidly recruited ranks. Cloths were imported by the Government, as a

protection against the enormous rates which holders of suitable stuffs were selfishly exacting. Besides, the ideas of the Government Bureaus did not and could not expand as fast as the unprecedented wants of the Army did. Timidity and caution tied up even the boldest hands. The suffering which existed in the rank and file from want of blankets, stockings, overcoats, and tents was very great. The regimental hospitals, under new and inexperienced Surgeons, without acquaintance with bureau routine, were often desperately deficient, both in what they might have had, if at the proper time they had known how to ask for it, and in what no skill in asking at that time could secure. The general hospitals were just beginning to be established. Inconvenient and wholly unsuitable buildings were the only ones within reach, and the Government was not then aroused to the necessity of creating proper ones. The Hospital Fund, the usual adequate resource of the Surgeon for all *extra* comforts and delicacies, now extensively—nay, universally—in operation, could not at once be inaugurated, even by experts, and was utterly beyond the management of novices. It afforded no dependence for many months, and was of little use for the first year of the war. The Sanitary Commission took its place, and supplied a large part of all which the best and most efficient management could have yielded. It came in, everywhere, to do just what Government and the Medical Department, in the sudden expansion of the Army, by successive monstrous motions, from 75,000 to 300,000, to 500,000, to 800,000 men, could not so adjust means to ends, and supplies to the vast wants of the hour, as effectively and humanely to accomplish. But it did its work on system, according to analogous rules, and with a strict understanding with the Department and Bureaus, so as to discourage the imperfect preparations or inadequate arrangements of the Medical Bureau or Quartermaster-General; to make neglect hard and difficult and disagreeable for them; to uphold their efforts for reform and enlargement; and to emphasize in such a way their dependence, as to shame them into efforts to break loose from it. The Commission furnished no hospital supplies except on requisition of the Surgeon himself, who thereby acknowledged his dependence on outside help for what it was his pride and his duty to obtain from the Department he represented. No distribution by outside parties was allowed. The discipline of the hospitals, with the authority of the officers, medical and otherwise, was to be carefully upheld. No help that could be extended to individual cases of suffering would atone for the injustice done the general principle itself.

That which has often been made an objection to the Sanitary Commission, that it did not fill the hospitals with resident relief agents, or nurses, who should themselves be the judges of the wants of the sick, and the direct vehicles of relief, in the form of clothing, delicacies, or medicines, was one of its cardinal virtues. Such intrusion into military hospitals was not only fatal to discipline, to due responsibility, to the quietude of the place, and the control of the diet and treatment of the sick, but it was fatal to the peace, the self-respect, and the *esprit de corps* of the Medical Department. Wherever it was allowed, it did little but harm, and if the Sanitary Commission had encouraged or countenanced it, they would soon have lost all the influence they had with the Department and the Surgeons. Instead of this, they appointed experts to visit the hospitals, observe their wants, see the officers, nurses, and men, and, after conference with the Surgeon in charge, to obtain from him a requisition on their supplies for what he felt the hospital to need—to be applied under his own orders, and by his own agents, to his own patients. Skilled and judicious women, offering their services as nurses, and accepted through the free and hearty consent of the Surgeons in charge, have rendered invaluable services to the sick ever since the hospitals were opened. But they have owed their usefulness to their strict obedience and conformity to Army regulations, and only those docile and wise enough to respect the superior knowledge and authority of the Surgeons have been for any considerable time able to keep their places, or to make themselves greatly serviceable. Perhaps two hundred such women exist in the whole Army; to

whose noble, devoted, and gentle hearts, skillful hands, and administrative faculties are due a considerable part of the success which has attended the operation of our military nursing. The main dependence is, at all times, on detailed or enlisted male nurses, who, to the number perhaps of two thousand, are always on duty, and to the unwearied labors of our Surgeons—who, as a class, are not only utterly incapable of the negligence, drunkenness, fraud, and greediness with which they have been publicly charged, but have really rendered illustrious services, not only by gallant self-exposure in the field, but in watching and waiting on their charges with a vigilance which has cost many of them their lives. The cruel aspersions with which bigots and fanatics have often visited their conduct on battle-fields, where three or four consecutive nights have passed in hard service, with only two or three hours' sleep, has made their ability to do any work, or to keep themselves alive, dependent on the use of stimulants—charging them with general drunkenness, as at Chancellorville—are a scandal and slander which the closest and longest opportunities of observation enable us utterly to refute. The ordinary per centage of incompetency, lack of principle, and inhumanity doubtless exists among the Army Surgeons; but on the whole, we judge them to be superior to any other equally large class of officers in the field, while their duties are probably more constant, and at times more exhausting, than those of any other class.

It is by strict fidelity to these general principles that the Sanitary Commission has endeavored to avoid the peril which threatened the efficiency of the Government service, by outside interposition; and its success as an organization is due to the genuineness of the faith in which it has carried out its pledges to the Government, to be a strictly subordinate and ancillary body—loyal to the Medical Department—its fearless critic, but never its rival or supplanter—its watchful spur, but never its sly traducer or its disguised enemy.

LETTERS IN OUR DRAWER.

It is no part of the business of the Commission to meddle in politics, but it will be seen from the following letter that we have been unconsciously instrumental in securing one vote for Mr. Lincoln.

FORT DELAWARE,
February 25, 1864.

MR. J. B. ABBOTT, *Washington:*

DEAR SIR—I received the statement of my inquiry in regard to my back pay, &c., which I am under a great obligation to you for, and I hope that I will be able to repay you some day. I will give you my address when I am at my native residence, and when this cruel war is over, and there ever should be any way that I could repay you and you let me know, I will try and do it for you. I am now a private soldier in the army, and expect to be, till this war is over, God permitting.

My address is William Graham, Temperanceville, Alleghany Co., Penn.

It was not for the amount of my pay that prompted me to write to the President of your famous institution, but for the disgrace of having me marked as a deserter when I had no intentions of any such a thing. It was not my wishes to be discharged from the service, but Dr. Reiter told me that I could not stand it at all; but it is as you say, that it is more satisfaction to know that I was not marked as a deserter, than to get two or three months' pay. I am no politician, nor neither do I know what politics you are, but if Old Abe does run again, and they get that bill passed in our Legislature to allow us poor soldiers to vote, I will give him a hoist. But I do not want to take up your time with nonsense. I will close.

Remaining very respectfully,
Your obedient servant,
WM. GRAHAM,
Battery G, Penn. Vols.

The report of Mr. Mühleck, one of the Relief Agents on the Potomac, contains some striking illustrations of the variety of the forms and degrees of suffering which we are called on to relieve—some of them touching enough, even to read of.

The rumors and apparent preparations for a move prevented me from leaving the store house to-day. But I would feel discontented, should I not mention that I have had the pleasure of doing good this Sunday afternoon. A young Sergeant of the 12th Massachusetts, pale and emaciated, stopped at our door, asking for some blackberry syrup. We had none; and he was quietly walking down the street, when I remarked that his weakness and prostration were so great that he could hardly walk. I called him back, and inquired what he was suffering from. He answered, from "chronic diarrhœa." He also told me that he was reported for discharge, but that he felt that unless the air of his home and a mother's care should very soon reach him, he would die. I gave him some cordial, filled his pockets with crackers and a piece of chocolate, and then he left the store.

He was deeply affected; I myself, hardly less than he.

At night fall, most of the 3d Corps passed through here. Quite a number of them, who felt weak and sick, stepped in and begged for some crackers, and in some instances, for stimulants. I complied with promptness and discernment. I had hardly sat down again to finish this report, when another fine young fellow from the 10th Vermont helped along by a Surgeon of his regiment, was brought in. The poor lad, in the darkness, had fallen down a high and steep embankment, fracturing his left arm, and probably his right fore arm. He was covered with dirt, and suffering intensely. George washed his face, while Norris rushed for bandages and rags, and I was helping the Surgeon in cutting his blouse and shirt off his body. I gave him some stimulants, and after he got examined and his arms partly dressed, I had him carried to the nearest hospital, (First Division.) His Surgeon, I add with great pleasure, was all care and kindness to him. Thus closes the first week of my new duties, although I had, previously to my connection with this Sanitary Commission, an idea of its work. Yet, I confess, I never appreciated the whole extent of its results and fruits. Happy do I feel, indeed, to be an instrument in thus dealing out the gifts of a grateful nation to her brave sons in the field.

Mr. Warner Johnson writes from the Brandy Station:

Our Lodge at Brandy Station has been found very useful to soldiers passing to and from the Army of the Potomac. One a wall tent, and two hospital tents, have been provided with bunks and supplied with abundant clothing. Since the 10th of January, one hundred and twenty soldiers found shelter for the night, who would otherwise have had the sky for their canopy, and no protection from the severity of the weather. About fifteen civilians, who had been benighted, have also been sheltered by us. Upon one occasion, a large number of artillery recruits reached here about dusk, whose brigades were scattered in various directions. In number about forty, they filled our three tents, and the floor of our main room; cooked their supper and breakfast, and left for their destination, well pleased with their accommodations. Last night about twenty soldiers filled our tents, and left this morning for their camps. We are enabled to save them much discomfort and suffering.

We find in the New Orleans *Era* of February 6, the following testimony as to the labors of our Agents in that quarter:

Dr. Blake, the efficient Agent of the Sanitary Commission, has fitted up the steamer Laurel Hill with conveniences for the transportation of sick and discharged soldiers to Cairo. It is his intention to furnish every man a comfortable cabin passage on this boat, and to this end has had the state rooms put in order, and supplied with new bedding, blankets, &c. In addition to this he has had bunks fitted up in the saloon capable of accommodating eighty-eight passengers. The table arrangements will admit of a large number to be seated at once. All the provisions, furniture, towels, bedding, cooking utensils, table furniture, &c., have been furnished by the Sanitary Commission, and are quite new.

The advantages of a cabin passage, with regularly cooked warm meals, on a steamboat to Cairo, over a deck passage by sea, are too obvious to need pointing out. The sick defender of the flag has found a friend in Dr. Blake, whom he will have reason to long remember and thank.

The Laurel Hill is a Government transport, and will bring freight to the Quartermaster on her return from Cairo, which, at present rates of freight, will more than pay her running expenses. It will be remembered that she was caught in a gale in the Gulf last September, in which she lost her smoke-stacks, and was damaged somewhat in her upper works. She has been thoroughly repaired and painted, and being a very staunch vessel, is in all respects as good as new. It was expected that she would leave for Cairo last night, under command of the experienced Captain Thomas, but it is likely that she will be detained until some time to-day.

And Mr. Bullard writes us, February 20th:

My communication with General Reynolds, through Dr. Stipp, has resulted quite as successfully as could have been anticipated. A camp of distribution has been organized, under the command of Lieut.-Colonel Webb. The Soldiers' Home has been as fully transferred to my care, by a special order from Gen. Reynolds, as under the circumstances could be desired.

* * * * * *

The arrival of the Pension Agent, Mr. Seaton, and his clerk, was very opportune. He already has his office crowded. There will be more than he can do in a few days. We shall be obliged to get for him more clerks. This "Home," on account of its central position in this Department, where necessarily large numbers of discharged and furloughed men gather and sometimes wait for transportation, is destined to be one of the most important connected with the Commission. As the Pension Office is near the Home, and in the same building with the Special Relief Office, which is already pretty well known among officials, it will have every facility for a large work.

* * * * * *

Good Out of Evil.—On the last trip of the transport steamer Cahawba to this port, a party of soldiers, contrary to Army regulations, engaged in gambling. Col. Stephen Thomas, of the 8th Vermont Regiment, fearing trouble would arise from this evil practice, determined to initiate the soldiers, who were new recruits, into Army rules and benefit their suffering comrades at the same time. He confiscated all the money on the board, and on arriving at the city turned it over to Dr. Geo. A. Blake, Chief Agent of the Sanitary Commission in this Department. The funds seized amounted to $135, and will be used for the relief of sick and wounded soldiers. This is a practical illustration that sometimes "Good cometh out of evil."—*New Orleans Era, Feb.* 12.

THE COMMISSION IN EUROPE.

We gave some account in No. 6 of the BULLETIN of the formation in Paris of an "European Branch of the Sanitary Commission," owing to the exertions of Dr. McClintock, and expressed the hope that we should before very long begin to reap the fruits of its labors, in the shape of contributions from the American residents abroad. It will be seen from the following extract from a letter just received from the Secretary, Mr. Bowles, that these expectations already begin to be realized:

Enclosed I now beg leave to hand you bill of lading of one case of books—German, I suppose—which has been sent me by the Rev. L. S. Jacoby, of Bremen. In writing to the different German cities on the Continent, I mentioned that donations of German books would be acceptable, as we had so many of that nation in our army. I have another lot, which I expect to forward soon. You will also receive some boxes, which I shall ship this week, containing presents for the Metropolitan Fair from this city. If it can be managed, it is very desirable that these boxes be not opened at the Custom House, as it will be impossible for them to do so and return the goods without serious breakage. I shall give you complete lists of their contents, probably certified by our Consul, Mr. Bigelow. You will also receive some packages for the Fair, which are not sent through me, and are directed to private individuals who are to have tables at the said Fair. As Dr. Bellows' idea seems to be a Paris Table, perhaps it would be well for him to see these persons, and suggest that these be added to the general contribution from this city, and I think the ladies who receive them would expect an invitation to attend the table.

I have ordered two hundred and fifty cases of brandy, one dozen *litre* bottles each case, which will be ready in about ten days. We have chosen a different quality from that about which I last wrote, this costing in the neighborhood of f.2.50 per *litre*. The other was too new, and we were afraid to send it.

We have already commented upon the singular fact that, at the International Sanitary Conference recently held in Geneva, no mention was made of the United States Sanitary Commission; nor did, as far as we can judge from the report of the proceedings, any member of the Conference seem to be aware that there was any such body in existence. The diffusion amongst these gentlemen of information concerning the amount of labor we have already accomplished in the very field on which they are just entering, is one of the tasks which the new Branch promises to perform with great efficiency. Mr. Bowles has already commenced the distribution of our documents. He says, in the letter from which we have already quoted:

I likewise enclose you a copy of a letter received from M. J. Henri Dunant, (prominent in the Genevan Sanitary Congress,) which, you will observe, is very friendly in its tone. I shall learn if there is another Congress to be held, and when, in order that the Commission may send delegates, should they wish to. Some publications, also received from him, in which the labors of the United States Sanitary Commission are recognized, I will send with the other goods.

M. Dunant's letter is as follows:

[TRANSLATION.]

SIR—I have the honor to acknowledge the receipt of your letter of the 5th inst., for which I cordially thank you.

I accept, with the liveliest gratitude, the offer which you make in behalf of your Committee to correspond with me, and to send me the statistical and other documents now in your possession, or which you may hereafter receive, concerning the operations of the Commission in the United States.

On my part, I shall take care to forward you all documents which I shall consider of a nature to interest you. The experience which you have acquired in America will be valuable to us; and, unfortunately, I fear we shall soon be obliged to put into practice in many countries of Europe, those ideas of humanity and of charity, the success of which we have all of us so much at heart.

I am rejoiced, sir, to have opened relations with you, and I beg to present my best thanks to your Committee.

Receive, sir, the expression of my high consideration and respectful esteem.

J. HENRI DUNANT,
Secretary of the International European Conference and Secretary of the General International Committee.

GENEVA, *February* 12, 1864.

THE WORK OF "RELIEF."

MR. KNAPP reports concerning the "Relief Work"—"general" and "special"—of the Commission, during the month of January.

Although the hospitals have not been full, and there have been no important movements in the field, yet there has been found constant occasion for the services of the Agents of the Commission, and the aid thus rendered has met real needs.

The general hospitals have been visited once each week, or oftener, and their actual wants supplied, while the aim has been constantly kept in view to make both Surgeons and patients feel as little dependent as possible upon any outside help, but rely upon securing the supplies furnished by Government, and upon the proceeds of a well-regulated "Hospital Fund."

The regimental hospitals have been visited constantly by the "Field Relief Corps" stationed with the several armies.

For the *Army of the Potomac*, the report of Dr. Steiner, Chief Inspector, will show you that his systematic method of work has aimed to keep him informed of the condition of all the regiments in that army; he embraces also in his care the troops in the vicinity of Harper's Ferry, of Point Lookout, of Norfolk, and of Fortress Monroe.

From *Newbern, N. C.*, and *Beaufort, S. C.*, no regular reports for the month have been received, but letters from Dr. Page and Dr. Marsh indicate that the relief work of the Commission at both these stations has been conducted, as in months past, with faithful efficiency. It will probably be necessary to enlarge our work in Dr. Marsh's Department by the establishment of a "Home," and an Agency for Special Relief at Hilton Head, and perhaps at one other point in that vicinity. Dr. Marsh has requested to be furnished with a plan for establishing and conducting a "Home" or "Lodge" at that place. It will be sent to him.

From "*The Department of the Gulf*" the reports are quite full, and very satisfactory. They indicate increased zeal and efficiency on the part of all the Agents of the Commission there; and on the part of soldiers and officers a continued and grateful recognition of the good service rendered by Dr. Blake and his associates in labor.

These reports cover the month of January, but date back some of them into December. They give record of relief service rendered *during the past few weeks, to twenty-one different military stations by personal visit by our relief agents with stores, and also of supplies furnished to eleven other stations.* Among the places of larger importance are New Orleans, New Iberia, Brashear City, Baton Rouge, Port Hudson, Forts Pike, Pickens and Barrancas, Decrovas Point, Texas, and Brownsville.

* * * * *

The vegetables sent in such abundance by the Commission to New Orleans, for distribution, have proved of immense good. Other supplies have been promptly received by our Agents there in advance of needs. Dr. Blake makes an earnest appeal for a boat, whereby independent transportation can be secured to the Commission for carrying supplies to points where needs exists, but to which transportation is often with great difficulty secured. It is a question, whether, in case we fail to obtain such boat from Government, it will not be wise and right for the Commission to purchase, and place there a small steamboat for this service, especially in view of the call which will probably be made the coming Spring upon the Commission for supplies to be carried to various points from New Orleans as a base.

Arrangements have been completed by which an Agency of the Commission for obtaining pensions, back pay and bounty has been established in New Orleans; and an experienced man (Mr. Seaton, recently of the Pension Office,) with a clerk, has been appointed to the work there, with all possible facilities secured to them by the Commissioner of Pensions and by the Second Auditor.

In connection with this work, Dr. Blake, of the Sanitary Commission, Chief Inspector for the Department of the Gulf, has been appointed by the Commissioner of Pensions "Examining Surgeon."

A large and very important field for special relief service of this particular kind (pensions, back pay and bounty,) is opened in New Orleans, and the distance of that place from the usual sources of assistance and information, renders the soldiers, or their families, stationed there peculiarly liable to those unjust dealings of claim agents against which the Commission seek to guard all who need help and protection.

The branch of special relief work at New Orleans and vicinity, which embraces "Homes" and "Lodges," is very satisfactory. The "Home" at New Orleans itself has been regularly transferred by the Western Sanitary Commission to the U. S. Sanitary Commission.

At "Brashear City" a "Home" has been established, which is rendering large kindness to many way-worn soldiers. Arrangements are also made by which Lodges will be established wherever and as fast as the necessities of the Army in that region call for or admit of their establishment. All the *material* for fitting up such Homes are in waiting at the store house in New Orleans.

* * * * *

Provision is made to accumulate a somewhat large amount of *supplies at the receiving store house* in Washington, to meet, probably, demands made by the Spring campaigns.

During this month no opportunity has been offered for the Commission to forward supplies to the prisoners at Richmond.

* * * * *

The Hospital Directory continues its kindly service, with constantly increasing facilities for usefulness.

MY EXPERIENCE OF THE GREAT FAIR.

I am no fabulous personage, neither a traveling sunbeam, nor a future New Zealander, nor one of the two horsemen who might have been seen coming over a hill, nor Robinson Crusoe, nor a Bourbon among us, nor an intelligent and reliable gentleman just escaped from Richmond.

My name is Watts. My wife married a Watts—and so that must be my true name. The story I shall tell is equally true. Some tales are admired because they abound in uncommon incidents, strange personages, original thoughts. But I have heard it said that the greatest productions of genius address themselves at once to the common experience of mankind. The present is one of those productions. On reading the first sheets to a select party of friends the other night, I was overwhelmed by their exclamations of astonishment and indignation. Jones, who lives at 152; Spriggs, who resides at 148; the charming widow in 154, and the crusty bachelor of 146 (all residents, you perceive, of our block), charged me with the unwarrantable publication of their own private experiences. I quieted their turbulence with one remark: "My friends," said I, "in regard to the Sanitary Fair, all good people feel and act alike. Portraying, therefore, in this respect, the history of a single virtuous soul, I have held a mirror to all virtuous souls." They breathed assent—all save Jones, who muttered "humbug!" but finding himself unsupported, even by the crusty bachelor, relapsed into cynic silence.

Not being one of those distinguished citizens who provided the preliminary $70,000 for the Fair, I noticed the effects of its approach first of all in my wife. We are all young folks, and our family consists of one remarkable boy. My wife had always had a weakness for worsteds, and of late she had lavished the products of her skill on that extraordinary child. Inasmuch as Susan was not extravagant in other respects, I had hitherto paid without a murmur her worsted bills, though in some families the introduction of so much zephyr would certainly have produced a storm. But now I saw with surprise that operations were in progress for which the existence of that inimitable babe was no adequate excuse. Certainly, an infant six months old, with Afghans, two breakfast capes, eight sacks, two hoods, an opera cloak, a pair of leggins, a red Sontag, a brown ditto, a pin cushion, ten pairs of socks, and knit underclothes innumerable and unmentionable, was sufficiently provided for. It was, therefore, with awe and wonder that I saw the beginning of a huge Afghan, which assumed, as it proceeded, the hues and features of the Star Spangled Banner. Now, I knew that a certain General, on the occasion of a serenade, had brought out upon a balcony his wife and baby, the latter wrapped in the American flag; and I remembered that my Susan reading of the circumstance in the newspaper, had been much impressed with the beauty and sublimity of the idea. I felt a fearful presentiment that she was about to try its effect upon our infant. I knew that my military reputation would not justify such a step. To be sure, I joined in the great Pennsylvania campaign, and sojourned a month in the hospital with other rheumatic warriors in the gallant —th; but all this did not prevent me from saying on the present occasion: "My dear, what are you doing? I hope that isn't for the baby!"

Susan having a gift of eloquence equal, I think, to Miss Dickenson, replied impromptu: "Yes, love! isn't it beautiful! and Matilda is going to make one just like it; and we are going to have a table; and I am on the committee, and so is that hateful Miss Jewsharp—and I want fifty dollars to buy materials—and, O, Augustus, you must write one hundred nice letters in poetry, you know—Mrs. Duffin says so—and all your grandfather's Revolutionary clothes and things, you know—and—"

"Susan!" I said suddenly, in my most impressive tone, "*will* you have the goodness to tell me what you are talking about?"

Thrown a little off her guard, she replied: "Why, don't you know! It's the Sanitary Fair!" For this direct and almost manly reply, I rewarded her with a green-backed fifty. This was the beginning of the beginning. As for the end, I dimly foresee it, and long for it, but it tarries afar off.

Thank Heaven, I am a philanthropist and a patriot. I do not object to being bled for soldiers, who are daily bleeding for us all. It will be seen, as my narrative proceeds, that beneath a graceful exterior of trifling mirthfulness, or even of satire, I carry a remarkably large and generous heart. In this respect I resemble the lamented Thackeray.—*From the Drum Beat, published by the Brooklyn Sanitary Fair.*

THE SOLDIERS' JOURNAL.

The first number of a new military periodical has reached us. It appeared on the 17th February, under the style of *The Soldiers' Journal*, and is published at the Convalescent Camp near Alexandria, Va., under the auspices of Miss Amy M. Beadley, the admirable and efficient Superintendent of the Relief Agency of the Sanitary Commission at that important center. It aims at supplying the thousands of men assembled there with wholesome reading-matter, and their friends and the people with information of their well-being and well-doing. This first number promises well, and the undertaking deserves support. Periodicals of this class should be collected and preserved, as material for the future histories of this great and memorable War. Twenty years hence stray numbers of them will be worth much more than their weight in gold.

WHO EATS THE SANITARY SUPPLIES?

The following testimony from Dr. Townshend is worthy of attention:

ST. LOUIS, MO., *February* 8, 1864.

MY DEAR WIFE—Your letter of the 1st inst., referring to the U. S. Sanitary Commission, was received to-day, and I reply immediately that you may have my testimony to use whenever it will encourage those whose hearts and hands are already in the work, or answer the objections of those who have listened to adverse reports.

And let me remind you at the outset, that my opportunities for observing are not simply those of a common soldier or line officer of equal rank, or Army Surgeons even, but much better; for, as Medical Inspector, I have wider range than either of them, and nothing else to do but look after what affects the health and comfort of the men, including, of course, food, clothing, shelter, surgical and medical treatment and nursing. I have seen not less than 25,000 sick and wounded men in hospitals, and have therefore many opportunities of judging of the doings of the Sanitary Commission, and now I will give you some of the conclusions at which I have arrived.

First.—I think it is far the best medium through which to send material comforts to the sick of the Army, and greatly preferable to State or local agencies. The Sanitary Commission is unitary and simple, embraces the whole field, and therefore overlooks nothing and duplicates nothing. Where would a State agent find his troops? In perhaps twenty different army corps in every Rebel State. A local agent, who cannot see the whole field, and don't know what has been sent here or there, cannot know where succor is most needed, and he lacks the facilities for communication and transportation.

Second.—The Agents of the Commission are not paid out of funds which you in Ohio contributed, nor do they consume the eatables which Aid Societies have sent. The salaried agents are paid from a California fund devoted to that purpose. I have often taken meals with the Agents of the Commission at their stations, and have invariably had set before me only what the market afforded, or the Agent's personal resources could supply.

Third.—I have no evidence that line officers ever use Sanitary stores, for they are never put under their charge, nor can they obtain possession of them by purchase or otherwise.

Sanitary stores designed for distribution among the sick of a hospital, are put under the control of the Surgeon in charge.

That stores, while in charge of the Surgeon, may in some instances have been misapplied, or used, or stolen, is possible, as of the stores belonging to the Government, but that the Surgeon in charge of any hospital has shared in or connived at any such misapplication, I have never heard charged by any person who had the means of knowing.

Two months since I visited (without notice,) the best hospital in Knoxville. Soon after I arrived the Surgeon's dinner-bell rang. I was invited to dinner. On the table was a clean table-cloth, and clean plates, and knives, and forks, and *pork*, and *bran bread*, and nothing else. The bread had not sufficient flour in it to hold it together; its cohesion appeared to depend on a little molasses used in the manufacture. I was helped bountifully. We all ate heartily, and no apologies were offered. On examining afterwards the food of several of the patients, I found them using good bread and crackers, and on inquiry learned there was not then (a few days after Longstreet left,) enough flour or army bread for all, and therefore the surgeons, the nurses and the patients, whose diseases would permit, used the bran bread, while the fine flour bread was reserved for those who had affections of the bowels. Other patients I found using garden vegetables of various kinds, and I learned that the supply being very short these were reserved for cases inclining to scurvy and other cases specially needing them; the surgeons, the nurses and patients who had nearly recovered could not indulge in such luxuries. Do you think that such Medical Officers would rob the sick soldier of a few delicacies that might be sent by his friends? A few days later I had the satisfaction of seeing two hundred and fifty packages of Sanitary stores, in addition to Government supplies sent from Chattanooga to the hospitals at Knoxville, and I have no fears that the doctors ate them up.

But why is it that returned soldiers do not more frequently express their gratitude for the comforts sent them? Because in most instances Sanitary stores are not distributed to the men directly by the Agent, but indirectly through the Surgeon in charge, and this is the only safe rule. Thousands of men in hospitals are wearing socks, drawers, shirts, and lying on beds, fed with food, and have their wounds bound up with bandages, all from the Sanitary Commission, without a suspicion of the fact. The Sanitary Agent tells the Surgeon what he has—the Surgeon tells the Agent what he wants, and it is put at his disposal to be given out as required. The Sanitary Agent, in his frequent visits to the hospitals, sees that his contribu-

tions are properly used; while the recipient himself may not know, or may not be in a condition to know, whether what he eats and drinks and wears comes from Uncle Sam himself, or some dear aunt or pretty cousin.

But, at the same time, scores of shirking loafers who are not sick, but pretend to a lame back, or a weak stomach, or fainting spells, are constantly endeavoring to sponge something out of Sanitary Agents; and if they fail, as they usually do, for these cowardly, grunting *melingerers* are easily recognized, they go away prepared to tell stories about the misapplication of Sanitary stores.

In short, I am satisfied that the Sanitary Commission is a well organized and well managed institution, and that it is the best possible agent for the distribution of what home fingers can prepare for the soldier.

I think, also, that for the coming Spring campaign we shall need all that can be raised, and I don't believe we shall need any thing afterwards.

As ever, yours,

N. S. Townshend.

RELIEF AND SUPPLY DEPARTMENT OF THE U. S. SANITARY COMMISSION.

From February 15th to February 24th, the stores and supplies issued to the Army from the New York office of the Commission, under the direction of the Standing Committee, have been as follows:

Sheets	603	Slippers	768
Socks	3,079	Farina	447
Bed Sacks	500	Dried Fruit	42
Pillow Cases	956	Beef Stock	906
Shirts	4,781	Jars Jelly	879
Drawers	4,098	Cordial, &c	1,035
Blankets	726	White Sugar	200
Towels	3,998	Pickles	2,150
Handkerchiefs	2,644	Cond. Milk	5,568
Mittens	638		

These have been forwarded to the points at which the wants of the Army have seemed most urgent. The largest portion has gone to Charleston Harbor, to North Carolina, to New Orleans, and to the Associate Secretary at Louisville, to be used under his direction, for the aid and comfort of our forces at Chattanooga and Knoxville. For this work the Central Treasury maintains, at heavy cost, steam transportation on the Western waters.

The estimated value of these supplies is $23,851.88.

They have been mostly drawn from the depot of the New York Branch, (the admirable and efficient Women's Central Association of Relief,) but a considerable portion of them has been necessarily purchased, and has been paid for by the Central Treasury. It is hardly necessary to observe, that the foregoing list does not include such supplies (doubtless of at least equal amount,) that have been drawn by the Commission from its other Branch Depots, East and West, during the same period.

The *garden seeds* that have been sent to the South and Southwest are to be used in the establishment of vegetable gardens at Hilton Head and other points, that will supply our men with anti-scorbutics, and thus save the heavy cost of shipping cargoes of potatoes and onions to the South, and the risk of spoiling on the way.

HOSPITAL SUPPLIES.

Washington, *February* 1, 1864.

F. N. Knapp,

Associate Secretary:

Sir—I herewith send you the report of Fresh Hospital Supply Department of the U. S. Sanitary Commission, for the month ending January 31, 1864:

Butter, print	586	lbs	Squash	1½	doz
" roll	4,873	"	Quails	½	"
" tub	4,371	"	Herbs	451	bch
Mutton	9,788	"	Sage	5	"
Lamb	102	"	Celery	25	"
Poultry	4,064	"	Oyster Plant	20	"
Veal	637	"	Lemons	6	bxs
Lard	240	"	Apples	72	bus
Fresh Fish	124	"	Turnips	234½	"
Salt "	4,000	"	Carrots	18	"
Pork	245½	"	Onions	117¼	"
Dry Apples	1,632	"	Beets	210	"
" Peaches	10	"	Potatoes	311⅜	"
Dressed Turkey	337¾	"	Rutabaga	36	"
" Duck	68	"	Parsnips	15	"
" Geese	16½	"	Sweet Potatoes	54	"
Eggs	3,912½	doz	Oats	12½	"
Cabbage	3,638	hds	Live Chickens	113	prs
Oysters	5	gall	Prairie "	1	"
Cranberries	962	qts	Mackerel	½	bbl
Ale	2	bbls	Ale	10	doz
Sausages	15	lbs			

The amount of weight of the above supplies as taken from bills of Adams Express Co., is 129,071 lbs. or 64 tons, 1,071 lbs.

All of which is respectfully submitted,

J. B. Clark,

Superintendent.

THE "SOLDIERS' HOMES" IN TENNESSEE.

During the four weeks ending January 30, there were received at the "Soldiers' Lodge," Memphis, 1,096 men, from seventeen States; 3,926 meals were furnished, and 1,205 lodgings. The average number admitted per day was: the first week, 90; the second week, —; the third week, 91, and the fourth week, 116. Papers were corrected for 14; 16 were aided in drawing pay, and 7 were sent to hospitals.

At the "Soldiers' Home," Nashville, during the same time, there have been admitted 2,478 from twenty different States; 9,818 meals have been furnished, and 3,906 lodgings. The average number admitted during the first week was 286; the second, 191; the third, 228; fourth, 195. Papers were corrected for 3, and 113 were aided in drawing pay.

CORRESPONDENCE.

TARRYTOWN, *February*, 1854.

MR. EDITOR—Tarrytown, not the least among the many charming places along the borders of the Hudson River, is surely, also, not the last on the list of villages noted for a sincere and devoted patriotism.

The spot where Arnold's treason came to shame and confusion does still, it seems to us, glory in an atmosphere of a pure and earnest love for our country, and an *unconditional* loyalty to our Government.

We were impressed with this conviction when some weeks since we were permitted to attend an entertainment given for the benefit of our brave, but sick and wounded soldiers, and under the auspices of the "Soldiers' Aid Society of Tarrytown." This society, numbering some seventy members—a branch of that giant and sublime charity, the "Sanitary Commission," which latter scatters its blessings over half a continent—is, we grant, but a twig as compared with many sister societies in the same glorious cause; but one which, from the character of the women engaged in it, we are convinced is bearing healthy and plentiful fruits. We hope we may be pardoned for employing the good old Saxon word *women* in this connection, for we believe that every true Northern *woman* is loyal to her heart's center. We can imagine a fine lady, of the genuine Flora McFlimsey pattern, to be a traitress; but a true-hearted woman, "a perfect woman, nobly planned," with a copperhead, except in the shape of a husband, would be as monstrous a creation as the Grecian Sphinx, and one that would propound to us a riddle as deep and as unanswerable as did, it is said, the abovementioned monstrosity of old.

We can furnish no better evidence of the working efficacy of the "Soldiers' Aid Society" of this place, than to mention that it is under the management of Mrs. Wm. S. Wilson, as President; Mrs. Chas. Rhind, Treasurer; and Miss Christina Wilson, Corresponding Secretary—as able an administration as may be found in the land.

The pleasant musical entertainment, which we intended to make the subject of our communication, was held on the evening of the 22d ultimo, in the hall owned by the Messrs. Smith & Morris, which gentlemen, with praiseworthy and patriotic liberality, gave the use of the house free of all and every expense. The performers were Mr. D. D. Griswold, the well known and pleasing ballad singer; and a Mr. Jacobsen, (a resident musician, we believe,) assisted by three of his fair pupils. Mr. Griswold's rendering of several Scotch and Irish ballads was certainly most admirable, and elicited a hearty applause from the large and decidedly appreciative audience. The instrumental performers did themselves fair credit, and had it been otherwise, it would be very ungracious, indeed, to criticise where all had so generously volunteered their services. Mr. Wilson, in the course of the evening, offered a vote of thanks to Messrs. Griswold and Jacobsen, which was carried by acclamation; responding to which, Mr. Jacobsen's remarks led us to infer that he is not a lover of copperheads.

The *net* proceeds of the concert were $80, which sum, under the judicious direction of Mrs. Wilson, will furnish many comforts for our gallant but suffering soldiers. God bless the noble men, women and children engaged in the patriotic work.

NESBOCAJ.

THE VITAL AND SANITARY STATISTICS OF THE BRITISH ARMY IN INDIA, COMPARED WITH THOSE OF THE FRENCH TROOPS, UNDER LIKE CONDITIONS OF CLIMATE AND LOCALITY.

[Paper read before the British Association, August, 1863.]

If the progress of intelligence and advance of civilization have widened the source of some diseases, by developing to a greater extent the fatal results of vicious habits and disorderly passions among the multitude, some compensation for such will be found in the present advanced state of the several sciences, and more particularly of preventive and curative medicine, to which statistics have been successfully applied, in proof of the deductions that are made in regard to health. The practical application of the precepts of *hygiène*, by removing the sources of many diseases, has rendered them less frequent, and less fatal, in all climates, than they proved to be in former ages. Since the beginning of the present century, a remarkable and advantageous change has been thus effected; and, through such means the ravages of epidemic diseases, and the mortality-rate of prisons, hospitals, and poor houses, existing for the use of our civil population, have been greatly diminished. Thus the disturbing influence of burial grounds, filthy and undrained localities in London, of the present seasons, and overcrowding on the life of man, which gave rise to prevailing diseases from the plague years 1593, 1603, 1625, 1636, and 1665 to that of 1838, have been so far ameliorated, according to the second report of the Registrar-General, as to cause a reduction of the mean mortality from 25 to 2.81 per cent.* In proportion also as the salubrious condition of London has been improved, the distribution of deaths, among the various periods of the year, has been more and more equalized, till the maximum of mortality for late years has ceased to correspond, as formerly, to the hot months of July, August, and September.

* "Second Report of the Registrar-General," p. 89, London, 1840.

What has been so happily accomplished for the improved health and comfort of our civil population, can in a great measure be secured for our soldiers, both at home and abroad. The practical measures carried out after the report of the Commissioners, appointed in 1857, to examine into the condition and administration of our army hospitals, and into the operation of regulations in force to prevent disease in our army, both at home and abroad, have been followed by a reduction in the rate of mortality of our infantry at home, from 15.5 per 1,000 effective men in 1828, to 8.77 in 1859 and 1860.* Dr. T. Graham Balfour's report, for this last year, has also stated the mortality of infantry of the line at home, for fifteen years, 1839-53 inclusive, to have been 16.9 per 1,000. But for the credit of the medical department of the Royal Army, the fact must not be passed over, that the army statistical reports, begun in 1835 by Mr. Henry Marshall, Deputy Inspector-General of Hospitals, while associated with Lieutenant Tulloch, 45th Regiment, (now Major-General Sir A. M. Tulloch, K.C.B.,) and continued by the latter, with the assistance of Dr. T. Graham Balfour (now Deputy Inspector-General of Hospitals,) first called attention to the condition of the soldier in regard to health, and the various deteriorating agencies which affected it. These reports led to the expediency of establishing the Registrar-General's Department, through which accurate information, on the extent and causes of mortality among the civil population, has been obtained. In 1838 the Commissioners' report, on the sanitary condition of the British Army, was published and laid before Parliament, followed by that on the organization of the Indian Army in 1859; and in this, the present year, 1863, we are favored with the very valuable and elaborate report of the Commissioners, appointed in 1859, to inquire into the sanitary state of the army in India.

In endeavoring to bring before you a short digest of the important information, collected in these volumes, regarding the influence of hot climates on the health of Europeans, and more particularly India, I propose to make free use of these reports, and of the statistical, sanitary, and medical reports of the Army Medical Department, for the years 1859 and 1860; as well as the collateral information, obtainable from the various reports on the mortality and sickness of English troops in India, published in the several volumes of the Statistical Society's *Journal*. For the facts on which a comparison may be made between the sanitary statistics of English and French troops, in hot climates, I shall chiefly have recourse to those supplied by M. Boudin in his "Traité de Géographie et de Statistique Médicales, et des Maladies Endémiques," Paris, 1857, and in his other publications on this subject.

We can scarcely overestimate the importance of ascertaining the causes and extent of losses sustained by armies, even in their native country, and in times of peace, from the ravages of disease; inasmuch as we cannot otherwise determine the expense of efficiently maintaining them, both at home and abroad. Independently of the annual decrements in armies, produced by various contingencies, as the good and bad materials that compose them, their ever-varying conditions under service, according to time and place, we must endeavor to fix the rates of their losses from disease, according to age and climate, and their ever variable reductions by war and invaliding. Military service, when performed under apparently most salubrious conditions of both locality and climate, whether at home or abroad, is generally found associated with a higher rate of mortality than that incident to the indigenous inhabitants of the soil; and as this difference is not so strongly marked among officers, subject to like climatic influences, as among the non-commissioned officers and men, it is for the most part produced by a greater amount of intemperance and other vicious habits among the latter, and by overcrowding in the barracks. The proof of this will be manifest from the following ratios of mortality among the civil male population of England and Wales generally, of the officers of the Royal Artillery serving in England during the year 1860, and of the infantry of the line from 1839 to 1853:

	Mean mortality, per 1,000.
Civil male population, England and Wales generally*.	9.28
Officers of the foot artillery, at home, 1860.	7.04
Infantry of the line, at home, for fifteen years, 1839-53	16.8

The proportion of mortality among the civil population of France, between 20 and 30 years of age, rises to 12 per 1,000; that of the infantry of the army at home, 22.3 per 1,000,† and of the non-commissioned officers 10.8.

Since the sickness and sanitary condition of armies, therefore, may be derivable from mixed causes of locality, overcrowding in barracks, meteorological climate, dietetic

*The former is the death-rate of troops serving for thirty-two years, from 1797 to 1828. See Boudin's "Statistique de la Mortalité des Armées de Terre et de Mer," Paris, 1846, p. 2, and Dr. Balfour's "Statistical Report for 1860," p. 13, where the mean of the two years is as stated.

*The data for England and Wales generally, have been obtained from Dr. Farr's life table, in the twelfth volume of the Registrar-General's "Reports," and from the "Army Statistical and Sanitary Report," 1860, p. 141, and Table 55 in Appendix to the Sanitary Commissioners' Report, "On the Regulations affecting the Sanitary Condition of the Army," London, 1858, p. 476.

†M. Boudin's "Statistique Médicale des Armées," p. 8, and "Statistique de l'Etat Sanitaire et de la Mortalité des Armées de Terre et de Mer," Paris, 1846, p. 16.

errors, and vice, it is necessary to carefully sift and separate such mixed causes, and assign to each their due influence, in the production of increased ratios of military sickness and mortality. Much may be otherwise laid to the deteriorating influences of climate, which are only effects of insalubrious localities, overcrowding, dietetic errors, and vicious habits.

Sickness and increased ratios of mortality among European masses, removed to new climates, seem inseparably associated with smaller numerical degrees of latitude, as we advance nearer the Equator; and even in France we find that, for the provinces of its northern latitudes, the average mortality is 1 in 44, but for those of the south 1 in 33. How much more then must such averages increase among English troops, serving in the tropical climates of India, or of French troops in other hot climates, under like insalubrious conditions. The localities occupied by either, and which come properly under the denomination of hot climates, lie from the Equator to the thirtieth and sometimes the thirty-fifth degree of north or south latitude. In Asia, and regions of the south, these are India on this side and beyond the Ganges, Ceylon, Arabia, Persia, and Cochin China; in North Africa, Algeria, and on the west Senegal; and to the south, the African islands of Réunion, Mauritius, Bourbon, and Madagascar; and in South America, Guiana, the French Antilles, or Martinique and Guadeloupe, and the English Antilles, or islands in the Gulf of Mexico, with all that part of our possessions called the West Indies.

It is not less evident, from Dr. Forry's report of the sickness and mortality in the army of the United States, that the ratios of military mortality in that country increase, as we proceed from the north to the south:

North.....	18.8	deaths for 1,000	effective strength.
South.....	52 3	"	"
Center.....	44.2	"	"

The causes for such increase being the combined insalubrious agencies of increased temperature and malarious localities. The greatly increased proportion of *miasmatic endemic diseases*, which we find admitted into hospitals from such places, clearly indicates that they have their origin more from endemic influences of locality, than the peculiar meteorological condition of the climate. It was for these reasons I stated in my evidence before the Royal Commission, appointed in 1859, "that in *tropical* "*latitudes* the mortality must be higher "than in *temperate latitudes*, even after all "that may be done for the troops by the "very best prophylactic measures, both *en*-"*demic* and *dietetic*."

After these preliminary observations on the mortality and sanitary state of English and French troops, employed in their native country, I proceed to briefly consider their relative mortality, and sanitary condition, when serving in *tropical climates*, more particularly India; and for the state of the former, past and present, I cannot do better than refer for information to the "Report of the Royal Sanitary Commission," just published.

The ratios of mortality, deduced from given numbers of men, are at once the measure of their lives and the healthiness of the places they inhabit. They differ for the different countries of Europe, and for the localities, according to the greater or less salubrity of particular regions and their geological formation; and are always lower for the indigenous inhabitants of the soil, than for those who migrate there from other countries. Those for Europeans, exposed to the climatic vicissitudes of military life, and other contingencies of service, show an increase, in proportion to the proximity of residence to the Equator, and unremoved sources of endemic disease there, as bad water, bad drainage, filthy locality, overcrowded and ill-constructed barracks, in combination with dietetic errors, vice, intemperance, and want of suitable clothing, occupation, and exercise, according to the conditions of climate and seasons. It would be quite impossible, amidst such extended subjects of inquiry, to select more than a tithe of them for illustration on this occasion; and I shall, therefore, confine myself to the three following heads:

1st. Mortality, and other ratios of decrement of the effective strength of European troops, serving in India, and other hot climates.

2d. The sanitary ameliorations of the sickness and mortality effected of late years.

3d. The sanitary measures still necessary for application to English troops in India.

According to Table I, copied from No. 10 in the Appendix to the "Report of the "Commissioners on the Sanitary State of "the Army in India," the average rate of military mortality there, for eighty-six years, is given at 67.9 per 1,000; being at the same time stated, in the body of the report at 69 in 1,000 during the present century. The following are the words of the report:* "The deaths in the fifty-six years, "1800-56, among all the Company's non-"commissioned officers and men, including "invalids, in India, amounted to 40,420 out "of an aggregate of 588,820 years of life, "obtained by adding up the average an-"nual strength in those years; so the an-"nual rate of mortality has been 69 in 1,000 "during the present century.

"The mortality rate was as high as 134 "in the first Mahratta War, and it was as "low as 41 in 1852. It was high again in

* "Report and Précis of Evidence," p. 18.

"the years of mutiny, and it has been sub-"sequently lower than the Indian stand-"ard. From the rate of 55 in 1770-99, the "rate rose to 85 in the thirty years, 1800-29; "and the mortality fell to 58 in the twenty-"seven years, 1830-56; so that the death-"rate of the British soldier, since the first "occupation of the country down to the "present day, has oscillated round 69 per "1,000."

TABLE I.—*Annual rate of Mortality in periods of years, from* 1770 *to* 1856, *in each of the Indian Presidencies.*

Years.	Death Annually to 1,000 Strength. Bengal.	Bombay.	Madras.	India.	Remarks.
1770-1800	70.6	78.2	37.5	54.7	The siege of Seringapatam and conquest of Mysore.
1800-10	91.5	84.5	54.8	73.7	General war in the Carnatic.
'10-20	68.7	99.6	97.0	84.3	Conquest of Dutch and French islands, Mahratta War, and cholera.
'20-30	84.5	97.9	95.2	90.7	
'30-40	60.1	46.3	55.5	55.7	
'40-50	79.5	68.3	43.5	65.4	
'50-56	67.8	31.1	44.3	50.7	Burmese War.
Total	....	....	....	67.9	

Note.—This table is copied from Table 10 of the Précis of the "Commissioners' Report of the Sanitary State of the Army in India," London, 1863, p. 178.

TABLE II.—*The Mortality of the French Army in Hot Climates, except Algeria, for ten years, from* 1838 *to* 1847, *is thus distributed in ratios per* 1,000.

Years.	Martinique.	Guadeloupe.	Guiana.	Senegal.	Reunion.	Average.
1838	79.1	192.6	48.0	152.5	32.4	110.6
'39	165.2	158.8	25.0	43.1	25.5	117.4
'40	103.5	156.9	19.1	65.5	20.0	98.4
'41	102.8	129.5	39.5	75.2	84.8	98.8
'42	86.8	42.1	26.5	62.0	30.5	52.1
1843	103.2	68.9	29.8	82.5	45.5	73.3
'44	78.0	72.1	19.2	66.2	28.1	58.8
'45	53.3	45.6	19.2	41.3	13.5	38.2
'46	93.6	25.6	16.6	27.6	19.7	37.4
'47	60.3	28.0	12.5	38.9	25.5	37.2
Mean	90.4	89.0	25.3	61.7	30.5	69.5

It is quite true that, in this next table for French troops in tropical climates, a like average of 69.5 per 1,000 is given; and the contrast is remarkable to show how much the rate is caused by hot climates and localities, and is not chiefly caused there by intemperance and vicious habits; a conclusion long since arrived at by Dr. Edward Balfour's statistics and observations on the means of maintaining troops in health, read before the Statistical Section of this Association, at Swansea, in August, 1848.* It is with earnestness he protests against partial deductions on this subject, and says: "Exertions solely de-"voted to check intemperance, even if suc-"cessful, can only palliate, but never re-"move, the evils that spring from climate. "It may, likewise, by withdrawing atten-"tion from one great, and I believe the "greatest cause of sickness, the noixous in-"fluence of particular localities, tend to re-"tard the day, which I hope to see, when "healthy sites having been selected for "cantonments, the English soldier shall en-"joy, in India, almost as good health as in "his native country." There can be hardly a difference of opinion as to the important part vice and intemperance play, in increasing the sickness and mortality of English soldiers abroad, and for the imperative necessity "of discontinuing the sale of "spirits in the canteens of India," and of adapting the soldier's diet to season and latitude. Still these unremoved sources of the sickness and mortality there, are not the main causes of the increased ratios of both; as Miss Nightingale's summary of the evidence, in the stational returns, proves† that the miasmatic diseases of fevers, diarrhœa, cholera, and dysentery, are produced under elevated temperature, by bad water, misplaced lavatories and cesspools, bad drainage, filthy bazars, and overcrowding in barracks, huts, and sick wards.

But reverting to the mortality-rate, 69 per 1,000, as being hitherto the normal one for sickness and disease in India, it is scarcely a true representation of the deduction that should be drawn from the facts collected in the various statistical tables, published in the Appendix to the Commissioners' own Report, sufficient allowance not being made for the increased casualties of war, cholera, and invaliding, during the period of fifty-six years, 1800-56, assumed for the basis of some of the calculations in the report. Of these fifty-six years, twenty-five, including the Sikh War, 1845-46, and the Punjaub campaign, 1848-49, were periods of war and cholera; this last disease, according to Inspector-Gen. Burke's Indian returns, 1826-32, having for these six years increased the mortality 11.5 per

* "*Journal* of the Statistical Society," vol. xii, p. 34, 1849.

† "Royal Commissioners' Report, vol. i, folio, p. 347.

1,000 of the effective strength.* Besides the average difference of mortality, between the war-rate and that of peace, or 27 per 1,000, as shown in the following table for Madras troops, not having been deducted, while the rate of invaliding in India is included, and thought of no importance, the assumed average of death, and decrements from natural causes, is thus raised to 69. It was not without good reason, therefore, that the Secretary of State for India, in his place in the House of Commons, the 23d of July last, said, "that the

TABLE III.—*Madras Troops.*

Years.	Service.	Number of Years.	Number of Deaths.	Average Annual Mean Strength.	Annual Average Number of Deaths.	Ratio per 1,000 of Deaths to Mean Strength.
	WAR.					
1798–98	Carnatic	6	1,549	5,696	258	49
'99–1800.	Mysore and conquered countries	2	1,548	6,967	774	111
1801–5	General war in the Carnatic, conquered countries, and the Deccan	5	3,691	8,355	738	88
'10–11	French and Dutch islands	2	1,844	13,328	922	69
'17–19	Pindarie War in the Deccan, and Malwa in Hindostan	3	2,993	13,585	997	73
'24–26	Burmah	3	3,646	10,144	1,215	119
	Total	21	15,271	8,796	727	82
	PEACE.					
1806–9	Peace	4	2,645	9,318	661	70
'12–16	Marching	5	3,460	12,133	692	57
'20–23	Peace	4	2,468	10,916	617	56
'27–38	"	12	6,221	10,660	618	48
	Total	25	14,794	10,781	692	55

"general conclusion as to the mortality, "being based on facts going far back, does "not afford a very good index of the sani-"tary state of the Indian Army at the pres-"ent moment."† When we turn to table IV in the Appendix of the Report, in which the rates of mortality for periods of service in the three presidencies, 1847-56, are given, we find that 51.2 per 1,000, inclusive of other casualties, was the average annual mortality of the late East India Company's European troops for those ten years. It is stated, in a foot note to the table, that the mortality for this period was considerably below the previous average in Madras and Bombay; but it is doubtless a more close approximation to the true rate of the mortality in India, for the last twenty-six years, than the one taken for the basis of the Sanitary Commissioners' Report. In Dr. T. G. Balfour's summary of the health of the Royal Army previous to 1859,* the following two tables give the rates for the three presidencies:

	1830-37.	1838-56.
Madras	52.2 per 1,000.	41.5 per 1,000.
Bombay	33.1 "	60.9 "
Bengal	44.5 "	76.2 "
Average	43.3 "	59.5 " (for 26 years.)

The mean of these two tables being 51.4, or the average mortality of the late East India Company's European forces, as given in the table of the report before quoted. Additional proof of this average being nearer the true one, for late years, than that assumed in the Commissioners' Report, may be drawn from the rate per cent. of invaliding for fifteen years' service.

Among the effective non-commissioned officers and men of the late Company's European forces, during the years 1847-56, as given in Table IV; and which rate, 27.8, deducted from 64.3, the mean casualty-rate of the last twenty-five years, 1838-62, inclusive of invaliding and cholera, would leave the normal death-rate of late years for India 36.5 per 1,000: the mean death-rate of our European troops in the three presidencies from 1850-54, being only 40.4.†

According to that table, the rate per cent. for deaths and discharges, among men who had served ten to fifteen years, is 5 28 per cent.; which, when raised for 1,000, would give 52.8 as the mortality-rate. In the same table 2.78 is given as the rate per cent. of invaliding at the above period of service, and when this is raised for 1,000 it gives the other casualties of service, 27.8, the difference, as already shown, between the war and the peace rates of mortality in India, previous to the year 1838. Perfect reliance cannot then, I think, be placed on the returns of the East India Company's troops, prior to this year, as the mortality-rates obtained from them include many abnormal casualties of service.

But descending from general statistical principles, for securing trustworthy con-

*Quoted by M. Boudin, p. 52 of his "Etat Sanitaire et "Mortalité des Armees de Terre et de Mar," Paris, 1846.

† "Times" newspaper of the 24th July, 1863, p. 7.

* "Statistical, Sanitary, and Medical Reports of the "British Army for the Year 1860," pp. 133 and 138, London, 1862

† This is the mean taken from the Report of the Commissioners appointed to inquire into the organization of the Indian Army, presented to Parliament in 1859; and has been quoted by the "Army Statistical Report, 1860," at p. 111. A well written article, in the "Times of India," September 9th, 1863, says, "A total mortality of 2,360 "men, upon a strength of 73,000, gives about 32 per 1,000 "as the average of all India; the Commissioners make "it 70; and we are persuaded that, if their figure be "divided by 2, the result will give about the right aver-"age."

TABLE IV.—*The Casualties in the effective Non-commissioned Officers and Men of the Local European Forces in India during the years* 1847-56.

Years of Service.	Strength. (Years of Life.)	Casualties. Deaths. (D.)	Invaliding. (I.)	D. & I.	All Causes.	Rate per cent. Deaths. (D.)	Invaliding. (I.)	D. & I.	All Causes.
1	14.390	938	45	983	1,547	6.52	.31	6.83	10.75
1-2	11.630	623	88	711	1,085	5.36	.75	6.11	9.32
2-3	9.220	518	83	601	872	5.62	.90	6.52	9.45
3-4	9.530	470	121	591	907	4.93	1.27	6.20	9.51
4-5	10.120	446	128	574	871	4.41	1.26	5.67	8.60
5-10	41.860	1,968	468	2,436	4,048	4.70	1.12	5.82	9.67
10-15	21.440	1,131	597	1,728	2,949	5.28	2.78	8.06	13.75
15-20	9 976	429	598	1,027	1,424	4.30	6.00	10.30	14.28
20 and upwards.	43.090	193	779	972	1,207	6.25	25.21	31.46	39.06

Note.—This table is compiled from the tables of casualties of effectives in the presidencies. Under "invalided," are included here, besides the true invalids, the following casualties: 1. Discharged by purchase. 2. Discharged on account of term expired or otherwise. 3. Promoted. 4. Transferred to town major's list. 5. Transferred to other corps. 6. Deserted. 7. Missing, &c. 8. Other causes. Those on the town major's list of Bengal are included among the effectives.

clusions on the subject of military mortality, let us enter on the statement of particular facts, regarding the increase and diminution of military death-rates for war and peace, brought together in Table V.

In this, the annual rate of mortality per 1,000, for the line forces of India, during the thirty-nine years, from 1817 to 1855 inclusive, is calculated from the table at p. 319 of the report. We here see that during the first Burmese War and the siege of Bhurtpoor, the rate rose as high as 158 per 1,000; and varied in times of peace from an average of 75 to 32.5 per 1,000. For seventeen years of war the death-rate was 80 per 1,000; and for twenty-two years of peace, 51.3; averages that correspond very nearly with those given in Table III.

But while the average mortality of the British Army in India, from 1830 to 1837, was only 43.3 per 1,000, according to Dr. Balfour's summary before quoted; in the next period, from 1838 to 1856, it rose to 59.5, including the mortality from wounds and service during the Afghan War, the Cabul massacre, the Sind and Gwalior campaigns, the Sikh War, 1845-46, and the Punjaub campaign, 1847-48, with the Second Burmese war, 1852-53; and when we deduct the casualties of war and service for this last period, the mortality-rate, 42.5 per 1,000, would, I believe, be a nearer approach to the normal standard of India during peace, than the mean of the two tables, 51.4.

TABLE V.—*Showing the Annual Rate of Mortality per* 1,000, *for the European Line Forces of India, during Thirty-nine Years, from* 1817 *to* 1855 *inclusive.*

Years.	Rate of Deaths per 1,000.	Remarks.	
1817....	69	Pindaree War.	
1818....	85		
'19....	80		
'20....	77	Average mortality 75 per 1,000 in peace.	
'21....	68		
'22....	73		
'23....	67		
1824....	129	Burmese War.	
'25....	157	Siege of Bhurtpoor.	
'26....	158		
1827....	75		
'28 ...	66		
'29 ..	50	Average mortality 53 per 1,000 in peace.	
'30....	36		
'31....	41		
'32....	47		
1833....	63	Coorg War.	
1834....	70		
'35....	34		
'36....	43	Average mortality 50 per 1,000 in peace.	
'37....	53		
'38....	52		
1839....	76		
'40....	95		
'41....	90	Afghan War.	Average mortality 74 per 1,000.
'42....	107	Cabul Massacre.	
1843....	77	Sind Campaign.	
'44....	81	Gwalior "	
1845....	124	First Sikh War.	
'46....	85		
1847....	47	Second Sikh War.	
'48....	65		
1849....	67		
1850....	42	Average 42 per 1,000 in peace.	
'51	42		
1852....	63	Second Burmese War.	
'53....	49		
1854....	35	Average mortality 32.5 in peace.	
'55....	30		

It was stated by Sir Charles Wood, in his

speech already referred to,* that "during the mutiny in India, the mortality in twenty regiments which were sent from this country, but which were not in action, was only 34 per 1,000," which must be exclusive of war casualties, I should think; and in the next table, or No. VI, which is a return of mortality and invaliding of her Majesty's troops serving in India, 1861, the actual mortality in India from locality and climate is 35.3 per 1,000; the other casualties for invaliding and deaths on the passage home being 33.3. All such sources of discrepancy, as direct and indirect results from warfare, and other contingencies, must be eliminated from our statistical data before a true estimated rate of the mortality, from natural causes of locality and climate, is attainable. If such peculiarities of service are not attended to, and minutely enumerated for all comparisons, we can arrive at only vague and by no means satisfactory conclusions.

TABLE VI.—*Annual Rate of Mortality and Invaliding of Her Majesty's Troops serving in India*, 1861, *exclusive of late Honorable East India Company's Troops.*

	Bengal.	Madras.	Bombay.	Total. India.	Deaths per 1,000 Strength.
Mean effective strength, 1861	37,483	10,739	8,860	57,082	..
Admitted into Indian Hospitals	73,233	13,471	15,649	102,253	..
Number of days under treatment (average sick time to each soldier)	29.30	21.04	26.65	25.66	..
Deaths in Indian Hospitals	16.42	156.	204.	2,002	35.3
Killed in Battle	None.	None.	None.	None.	None.
Deaths on board ship, on passage home, and in Hospitals at home	66.	14.	15.	95.	1.67
Invalided	Returns not received.	38.2	255.	Bengal returns not received.	33.3
			6.37		

Colonel Sykes' paper,† on the Sickness, Mortality, and Invaliding in the East India Company's European and Native Troops, from 1825-44, the last being the year previous to the Sikh War, gives the rate per cent. of European mortality 5.409, and that of invaliding 2.884 per cent., which rates, when raised for 1,000 men, become respectively 54.09 and 28.84. The former rate, however, includes 7.24 per 1,000 of deaths from cholera; and which, when deducted from the aggregate death-rate, leaves that of ordinary deaths from other natural causes 46.85 per 1,000. The rate for invaliding is a little higher than that I have employed for deduction, to obtain the hitherto normal rate of European mortality in India.

(To be concluded in our next.)

* "Times" newspaper, 24th July, 1863.

† This, which is quoted from the *Statistical Journal*, vol. x., p. 100, forms Table 28, "Appendix of the Commissioners' Sanitary Report," 8vo, p. 195.

IMPUTATIONS ON THE COMMISSION.

An anonymous imputation on the integrity of the management of the United States Commission has obtained some currency lately. It was an insinuating fling making no charges and therefore difficult to be met. This is not the first time that this beneficent enterprise has been the target of malice, envy, or something equally mean and ungenerous. There may be exceptional instances of misconduct in the agents of this organization, who are numerous, as there always must be in all undertakings of men, while men are human, but the general conduct of the Commission is above reproach; nay, it merits the grateful approbation of the American people for its active, timely and tender charity towards the sick and wounded men in our armies.

The Commission has performed a double duty, with admirable fidelity and with munificent results on the one hand, and beneficent effects on the other. With one hand, and with its voice, it has appealed to the people in behalf of their suffering brothers, who are stricken in the discharge of their soldiers' duty, till it touched their hearts and commanded their lavish bounty which the necessities of the case drew so largely upon. With the other hand it has been the almoner of the noble contributions it has caused to be made. It has collected, prepared and husbanded these till the havoc and destruction of the battlefield solicited aid, and then has sympathizingly and most serviceably distributed them. Its chief officers have served "without money and without price." Its subordinate agents are paid very moderate wages. The whole expense of the Commission is as scrupulously kept down as the business expense of a snug firm in trade.

Not lightly, not unjustly, is this grand charitable organization to be spoken of to the detriment of its self-sacrificing character and of its means for continuing its needful work. While the war lasts, its work will last. While the war lasts it must continue to appeal to the generosity of our people for support, and to bestow the means for relief which it receives as it has hith-

erto done. We have always applauded the intrepid, resolute and tender-hearted women who administered to the relief of the sick and distressed men in Crimean camps. We can refuse to do no less, in justice to this organization, which is as pure in motive and energetic and intrepid in work and beneficent in results as the single-handed charity of the English Sanitary Commission.

We may exhibit the conduct of the Commission in its financial administration, the point where it is covertly attacked, by subjoining the following statement, from the BULLETIN of the Commission, made by Dr. Bellows. This is his final summing up, after giving some details:

1. The Board of the U. S. Sanitary Commission, Vice President, Treasurer, Medical Committee and Standing Committees, give time and services gratuitously. They are refunded (in part,) their traveling expenses; nothing more.

2. Their agents, two hundred in number, general and associate secretaries, medical and sanitary inspectors, relief agents, clerks, depot and store house keepers, wagoners, &c., receiving some more and some less, average just $2 per day, or less than ordinary mechanics' wages. Total, $12,000 per month for the vast human machinery of the Commission, stretching from Texas to the Potomac, from before Charleston to Kansas.

3. About fifteen-sixteenths of all the eight millions the Commission has received, goes on to the backs, or into the mouths of the soldiers.

4. The cost of collecting and distributing supplies is less than three per cent.

5. About twenty-three hundred men are now, and for a long time have been, in daily use and enjoyment of the homes and lodges of the Commission.

6. The battle-field service of the Commission requires a large accumulation of funds and of supplies. At Murfreesboro', Antietam, Gettysburg, Chattanooga, Vicksburg, Port Hudson, sudden and vast demands were made, and are always likely to be made. Fifty thousand dollars would not cover the cost of our whole service in the first two weeks after any one of our great battles—at Gettysburg it was $75,000.

7. We reckon that if we divided all the aid we have given to the sick in regimental, general, and other hospitals, to men in peril of sickness from scurvy and exposure, it would amount to $3.50 a case; many men having received this several times, as often as they were sick. The seriously wounded have been often—as at Gettysburg—the receivers of as much as $10 aid per man. We mention this to show not how much, but how little, this sometimes called extravagant Commission costs, considering the blessings it is the almoner of.—*Utica Her'ld.*

NOTES ON NURSING.

NOISE.

Conciseness and decision are, above all things, necessary with the sick. Let your thought expressed to them be concisely and decidedly expressed. What doubt and hesitation there may be in your own mind must never be communicated to theirs, not even (I would rather say especially not) in little things. Let your doubt be to yourself, your decision to them. People who think outside their heads, the whole process of whose thought appears, like Homer's, in the act of secretion, who tell every thing that led them towards this conclusion and away from that, ought never to be with the sick.

Irresolution is what all patients most dread. Rather than meet this in others, they will collect all their data, and make up their minds for themselves. A change of mind in others, whether it is regarding an operation or re-writing a letter, always injures a patient more than the being called upon to make up his mind to the most dreaded or difficult decision. Further than this, in very many cases, the imagination in disease is far more active and vivid than it it is in health. If you propose to the patient change of air to one place one hour, and to another the next, he has, in each case, immediately constituted himself in imagination the tenant of the place, gone over the whole premises in idea, and you have tired him as much by displacing his imagination, as if you had actually carried him over both places.

Above all, leave the sick room quickly and come into it quickly, not suddenly, not with a rush. But don't let the patient be wearily waiting for you when you will be out of the room or when you will be in it. Conciseness and decision in your movements, as well as your words, are necessary in the sick room, as necessary as absence of hurry and bustle. To possess yourself entirely will ensure you from either failing—either loitering or hurrying.

If a patient has to see, not only to his own but also to his nurse's punctuality, or perseverance, or readiness, or calmness, to any or all of these things, he is far better without that nurse than with her—however valuable and handy her services may otherwise be to him, and however incapable he may be of rendering them to himself.

With regard to reading aloud in the sick room, my experience is, that when the sick are too ill to read to themselves, they can seldom bear to be read to. Children, eye-patients, and uneducated persons are exceptions, or where there is any mechanical difficulty in reading. People who like to be read to, have generally not much the matter with them; while in fevers, or where there is much irritability of brain, the effort of listening to reading aloud has often brought on delirium. I speak with great diffidence; because there is an almost universal impression that it is *sparing* the sick to read aloud to them. But two things are certain:

(1.) If there is some matter which *must* be read to a sick person, do it slowly. People often think that the way to get over it with the least fatigue to him is to get it over in least time. They gabble; they plunge and gallop through the reading. There never was a greater

mistake. Houdin, the conjuror, says that the way to make a story seem short is to tell it slowly. So it is with reading to the sick. I have often heard a patient say to such a mistaken reader, "Don't read it to me; tell it me." Unconsciously he is aware that this will regulate the plunging, the reading with unequal paces, slurring over one part, instead of leaving it out altogether, if it is unimportant, and mumbling another. If the reader lets his own attention wander, and then stops to read up to himself, or finds he has read the wrong bit, then it is all over with the poor patient's chance of not suffering. Very few people know how to read to the sick; very few read aloud as pleasantly even as they speak. In reading they sing, they hesitate, they stammer, they hurry, they mumble; when in speaking they do none of these things. Reading aloud to the sick ought always to be rather slow, and exceedingly distinct, but not mouthing—rather monotonous, but not sing song—rather loud, but not noisy—and, above all, not too long. Be very sure of what your patient can bear.

(2.) The extraordinary habit of reading to oneself in a sick room, and reading aloud to the patient any bits which will amuse him or more often the reader, is unaccountably thoughtless. What *do* you think the patient is thinking of during your gaps of non-reading? Do you think that he amuses himself upon what you have read for precisely the time it pleases you to go on reading to yourself, and that his attention is ready for something else at precisely the time it pleases you to begin reading again? Whether the person thus read to be sick or well, whether he be doing nothing or doing something else while being thus read to, the self-absorption and want of observation of the person who does it, is equally difficult to understand—although very often the read*ee* is too amiable to say how much it hurts him.

One thing more: From the flimsy manner in which most modern houses are built, where every step on the stairs, and along the floors, is felt all over the house; the higher the story, the greater the vibration. It is inconceivable how much the sick suffer by having any body overhead. In the solidly built old house, which, fortunately, most hospitals are, the noise and shaking is comparatively trifling. But it is a serious cause of suffering, in lightly built houses, and with the irritability peculiar to some diseases. Better far put such patients at the top of the house, even with the additional fatigue of stairs, if you cannot secure the room above them being untenanted; you may otherwise bring on a state of restlessness which no opium will subdue. Do not neglect the warning, when a patient tells you that he "Feels every step above him to cross his heart." Remember that every noise a patient cannot *see* partakes of the character of suddenness to him; and I am persuaded that patients with these peculiarly irritable nerves, are positively less injured by having persons in the same room with them than overhead, or separated by only a thin compartment. Any sacrifice to secure silence for these cases is worth while, because no air, however good, no attendance, however careful, will do any thing for such cases without quiet. The effect of music upon the sick has been scarcely at all noticed. In fact, its expensiveness, as it is now, makes any general application of it quite out of the question. I will only remark here that wind instruments, including the human voice, and stringed instruments, capable of continuous sound, have generally a beneficial effect—while the piano-forte, with such instruments as have *no* continuity of sound, has just the reverse. The finest piano-forte playing will damage the sick, while an air, like "Home, sweet home," or "Assisa a pié d'un salice," on the most ordinary grinding organ, will sensibly soothe them—and this quite independent of association.

VARIETY.

To any but an old nurse, or an old patient, the degree would be quite inconceivable to which the nerves of the sick suffer from seeing the same walls, the same ceiling, the same surroundings during a long confinement to one or two rooms.

The superior cheerfulness of persons suffering severe paroxysms of pain over that of persons suffering from nervous debility has often been remarked upon, and attributed to the enjoyment of the former of their intervals of respite. I incline to think that the majority of cheerful cases is to be found among those patients who are not confined to one room, whatever their suffering, and that the majority of depressed cases will be seen among those subjected to a long monotony of objects about them.

The nervous frame really suffers as much from this as the digestive organs from long monotony of diet, as the British soldier from his twenty-one years' "boiled beef."

The effect in sickness of beautiful objects, of variety of objects, and especially of brilliancy of color, is hardly at all appreciated.

Such cravings are usually called the "fancies" of patients. And often, doubtless, patients have "fancies," as *e. g.* when they desire two contradictions. But much more often their (so called) "fancies" are the most valuable indications of what is necessary for their recovery. And it would be well if nurses would watch these (so called) "fancies" closely.

I have seen, in fevers, (and felt, when I was a fever patient myself,) the most acute suffering produced from the patient (in a hut,) not being able to see out of window, and the knots in the wood being the only view. I shall never forget the rapture of fever patients over a bunch of bright-colored flowers. I remember (in my own case,) a nosegay of wild flowers being sent me, and from that moment recovery becoming more rapid.

People say the effect is only on the mind. It is no such thing. The effect is on the body, too. Little as we know about the way in which we are affected by form, by color and light, we do know this, that they have an actual physical effect.

Variety of form and brilliancy of color in the objects presented to patients are actual means of recovery.

But it must be *slow* variety, *e. g.*, if you show a patient ten or twelve engravings successively, ten-to-one that he does not become cold and faint, or feverish, or even sick; but hang one up opposite him, one on each successive day, or week, or month, and he will revel in the variety.

The folly and ignorance which reign too often supreme over the sick room cannot be better exemplified than by this. While the nurse will leave the patient stewing in a corrupting atmosphere, the best ingredient of which is carbonic acid, she will deny him, on the plea of unhealthiness, a glass of cut-flowers, or a growing plant. Now, no one ever saw "overcrowding" by plants in a room or ward. And the carbonic acid they give off at nights would not poison a fly. Nay, in overcrowded rooms, they actually absorb carbonic acid and give off oxygen. Cut flowers also decompose water and produce oxygen gas. It is true there are certain flowers, *e. g.*, lilies, the smell of which is said to depress the nervous system. These are easily known by the smell, and can be avoided.

Volumes are now written and spoken upon the effect of the mind upon the body. Much of it is true. But I wish a little more was thought of the effect of the body on the mind. You who believe yourselves overwhelmed with anxieties, but are able every day to walk up Regent Street, or out in the country, to take your meals with others in other rooms, &c., &c., you little know how much your anxieties are thereby lightened; you little know how intensified they become to those who can have no change;* how the very walls of their sick rooms seem hung with their cares; how the ghosts of their troubles haunt their beds; how impossible it is for them to escape from a pursuing thought without some help from variety.

A patient can just as much move his leg when it is fractured as change his thoughts when no external help from variety is given him. This is, indeed, one of the main sufferings of sickness; just as the fixed posture is one of the main sufferings of the broken limb.

It is an ever recurring wonder to see educated people, calling themselves nurses, acting thus. They vary their own objects, their own employments, many times a day; and while nursing (!) some bed-ridden sufferer, they let him lie there staring at a dead wall, without any change of object to enable him to vary his thoughts; and it never even occurs to them, at least to move his bed so that he can look out of window. No, the bed is to be always left in the darkest, dullest, remotest, part of the room.

I think it is a very common error among the well to think that "with a little more self-control" the sick might, if they choose, "dismiss painful thoughts" which "aggravate their disease," &c. Believe me, almost *any* sick person, who behaves decently well, exercises more self-control every moment of his day than you will ever know till you are sick yourself. Almost every step that crosses his room is painful to him; almost every thought that crosses his brain is painful to him; and if he can speak without being savage, and look without being unpleasant, he is exercising self-control.

Suppose you have been up all night, and instead of being allowed to have your cup of tea, you were to be told that you ought to "exercise self-control," what would you say? Now, the nerves of the sick are always in the state that yours are in after you have been up all night.

We will suppose the diet of the sick to be cared for. Then, this state of nerves is most frequently to be relieved by care in affording them a pleasant view, a judicious variety as to flowers,* and pretty things. Light by itself will often relieve it. The craving for "the return of day," which the sick so constantly evince, is generally nothing but the desire for light, the remembrance of the relief which a variety of objects before the eye affords to the harrassed sick mind.

Again, every man and every woman has some amount of manual employment, excepting a few fine ladies, who do not even dress themselves, and who are virtually in the same category, as to nerves, as the sick. Now, you can have no idea of the relief which manual labor is to you—of the degree to which the deprivation of manual employment increases the peculiar irritability from which many sick suffer.

A little needle-work, a little writing, a little cleaning, would be the greatest relief the sick could have, if they could do it; these *are* the greatest relief to you, though you do not know it. Reading, though it is often the only thing the sick can do, is not this relief. Bearing this in mind, bearing in mind that you have all these varieties of employment which the sick cannot have, bear also in mind to obtain for them all the varieties which they can enjoy.

I need hardly say that I am well aware that excess in needle-work, in writing, in any other continuous employment, will produce the same irritability that defect in manual employment (as one cause) produces in the sick.—*Miss Nightingale.*

* It is a matter of painful wonder to the sick themselves, how much painful ideas predominate over pleasurable ones in their impressions; they reason with themselves; they think themselves ungrateful; it is all of no use. The fact is, that these painful impressions are far better dismissed by a real laugh, if you can excite one by books or conversation, than by any direct reasoning; or if the patient is too weak to laugh, some impression from nature is what he wants. I have mentioned the cruelty of letting him stare at a dead wall. In many diseases, especially in convalescence from fever, that wall will appear to make all sorts of faces at him; now, flowers never do this. Form, color, will free your patient from his painful ideas better than any argument.

EXTRACT FROM REPORT OF RELIEF AGENT, THIRD CORPS.

"Friday, being Christmas Day, I saw the prisoners† again that I visited early in the week, and furnished them some articles as indicated in the abstract.

"I was much amused at the plan adopted by the prisoners in order to get tobacco. The prisoners have formed themselves into what they call the 'Tobacco Club,' and every man, on his arrival, must either pay the sum of fifty cents or be tossed in a blanket. The majority willingly pay the amount required. The money goes into a common treasury to be expended in the purchase of tobacco, which is divided equally among all. The other night, a rough, independent sort of a fellow was brought in, and refused peremptorily to pay the amount required, ridiculing, at the same time, the penalty but the tossing was resorted to, and before it was over, he would have willingly paid the fifty cents, could he have been released from the vigorous exercise."

* No one who has watched the sick can doubt the fact that some feel stimulus from looking at scarlet flowers, exhaustion from looking at deep blue, &c.

† Deserters and others, some on slight charges.

THE U. S. SANITARY COMMISSION

Was constituted by the Secretary of War in June, 1861, in accordance with the recommendation of the Surgeon-General of the U. S. Army, and its appointment and plan of organization were approved by the President of the United States. Its present organization is as follows:

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The Sanitary Commission has made arrangements for supplying information gratuitously, with regard to patients in all the United States General Hospitals.

For information relative to patients in the Hospitals in New York, New Jersey, the New England States, Eastern Virginia, Maryland, District of Columbia, North Carolina, South Carolina, Florida and Louisiana, address "Office of Sanitary Commission, Washington, D. C."

For the Hospitals in Pennsylvania, address "Office of Sanitary Commission, No. 1,307 Chestnut Street, Philadelphia."

For the Hospitals in Western Virginia, Ohio, Indiana, Illinois, Missouri, Iowa, Kentucky, Tennessee, Mississippi, and Arkansas, address "Office Sanitary Commission, Louisville, Ky."

In all cases the name, rank, company, and regiment of the person inquired for should be given, and where he was when last heard from. If the application is by letter, the answer will be sent by return of mail; if in person, it will be answered at once; or if by telegraph, an answer will be returned immediately at the inquirer's expense.

☞ Soldiers' Aid Societies, clergymen, editors, and others, can scarcely serve the cause of humanity more effectually than by frequently and widely disseminating a knowledge of the above, among those who have friends in the army.

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The Sanitary Commission, under special authority of the President of the United States, maintains an extensive system of agencies for securing the safe conveyance to, and distribution of, goods put in its charge for the sick and wounded at points where they are most wanted. It operates with equal care and generosity at all points—at New Orleans and at Washington, before Charleston and at Chattanooga—its distributions being governed by a comparison of the wants of the patients in all cases. The following is a list of depots, to which auxiliary societies, and all disposed to aid the sick and wounded, without reference to States or localities, but simply to their relative necessity for assistance, are invited to send their offerings:

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The Commission receives no pecuniary aid whatever from the Government, and is wholly dependent on the voluntary contributions of the public for the means of sustaining its operations. Contributions to the Treasury are solicited, and may be transmitted to George T. Strong, Esq., Treasurer, 68 Wall Street, N. Y.

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OFFICE OF THE

Columbian (Marine) Insurance COMPANY,

CORNER OF WALL AND NASSAU STREETS.

CASH CAPITAL, - - - $1,000,000.

From Statement for the Sixth Fiscal Year, ending December 31, 1863.

Total Amount of Assets, January 1, 1864	$3,140,930 80
Total Amount of Premiums	3,252,256 76
Excess of Earned Premiums over Losses, &c.	1,137,063 33
Reserve for Estimate Claims Unadjusted and other Contingencies	441,206 49
Guaranteed Cash Dividend to Dealers, (holding certificates of same) on Paid Premiums Earned during the Year, whether Loss has Accrued or not	269,614 80
Scrip Dividend to Dealers, on Earned Premiums	15 per cent.
Dividend for the Year to Stockholders	26 per cent.

LOSSES PAID IN GOLD upon Risks on which the Premium is paid in like Currency.

DEALERS WITH THIS COMPANY will be allowed the option (to be signified at the time of application for insurance) of receiving in lieu of scrip, at the end of each year, RETURNS IN CASH, (guaranteed by certificate) of premiums paid and earned during the year, whether loss accrues or not, upon all new risks under the NEW YORK FORM OF POLICY, as follows:

1st. Upon all VOYAGE Risks upon CARGO, a return of TWENTY-FIVE PER CENT.

2d. Upon VOYAGE Risks upon FREIGHT, a return of TWENTY PER CENT.

3d. Upon TIME Risks upon FREIGHT, and upon VOYAGE and TIME Risks upon HULLS, a return of TEN PER CENT.

Such privilege, however, being confined to persons and firms, the aggregate of whose premiums upon such policies earned and paid during the year, shall amount to the sum of one hundred dollars.

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PARTICIPATION

FIRE INSURANCE.

NORTH AMERICAN

FIRE INSURANCE COMPANY,

Of the City of New York,

OFFICE, No. 114 BROADWAY.

INCORPORATED 1823.

CASH CAPITAL, - - - - - - $500,000 00
ASSETS, - - - - - - - 604,535 59

NO CLAIMS FOR LOSSES.

Abstract of the EIGHTY-THIRD Semi-Annual Statement, showing the Condition of the Company on the 31st day of December, 1863.

ASSETS:

Loans on Bond and Mortgage, being first lien on Real Estate, worth over Fifty per cent. above the amount loaned	$157,360 00
Stocks, Bonds, and other Securities owned by the Company, market value	364,385 00
Cash in Bank and Office	6,603 11
Loans on demand with collateral	46,000 00
Premiums due and outstanding	5,384 00
Cash in Agents' hands in course of transmission, (business of December since received,)	10,220 39
Interest accrued on Securities	13,788 83
Other Property of Company	793 75
	$604,535 59

Losses unpaid, none.

Insures Property against Loss by Fire at usual rates, at the Office of the Company, or through their Agents in the principal Cities and Villages of the United States; adjusting and paying Claims with the liberality and promptness that has characterized their business during the past *Forty-one Years.*

The Customers receive **Three-Fourths** of the Net Profits of the business each year, without incurring any liability whatever.

R. W. BLEECKER, Sec'y. **JAMES W. OTIS, Pres't.**

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*** The above work is the result of a commission sent by the French Government to the Crimea to report upon the condition of the Hospitals and troops of the French army, and incidentally of the English and Sardinian armies. It is written in the form of a narrative, and the great questions of the *prevention and control of disease in camps and hospitals* are thoroughly discussed. The hygienic conditions of the United States Army are similar to those of the armies of the Crimea; the rules and prescriptions given in the book will, therefore, be found perfectly applicable. This work recommends itself to commanders of regiments as well as army surgeons.

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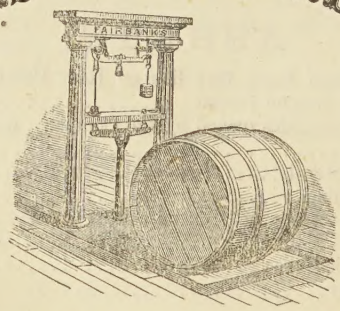

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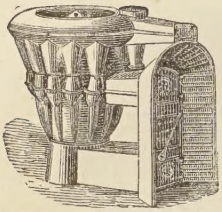

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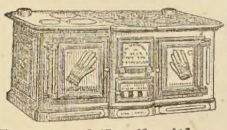

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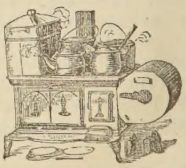

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